FIRST NOTICE

LAKEWOOD HOUSING AUTHORITY

Required Documents for Eligibility

THESE DOCUMENTS MUST ACCOMPANY YOUR PACKET

The Following documents are required to complete your Certification. Please provide all documents that apply to you and /or any member of your household.

ALL DOCUMENTS MUST BE CURRENT. WE WILL NOT ACCEPT DOCUMENTS OLDER THAN ONE MONTH WITH THE EXCEPTION OF CHECKING ACCOUNT STATEMENTS.

ALL FAMILY MEMBERS WHO ARE/WILL BE 18 YEARS OR OLDER AT THE EFFECTIVE DATE OF YOUR CERTIFICATION, MUST SIGN THE DOCUMENTS. NO EXCEPTIONS.

1. **IDENTIFICATION VERIFICATION –**Birth Certificate and Social Security card for all family members.

2. **TAX RETURN** – Provide a current Federal and State Income Tax Return, signed and completed along with all W-2 and/or 1099 information.

3. **VERIFICATION OF INCOME** – for all members of the household age 18 years and older.
   a. *Employment Verification* – Provide the name, address, phone, and fax number of all current employer(s), as well as 2 months of consecutive pay stubs. This includes wages from Door Dash, Instacart, Uber, Shipt, etc.
   b. *Social Security/SSI/SSD*– Provide your benefit letter from the government agency indicating monthly income.
   c. *General Assistance/TANF* – Provide your benefit letter from the government agency indicating monthly income/assistance.
   d. *Pension* – Provide a letter from the agency disbursing the pension; however, if you have a problem getting a letter, a copy of your pension check will be acceptable.
   e. *Child Support* – Provide a check stub, print out, or court documents indicating the amount you receive. If this money goes directly to the Board of Social Services, that must be indicated in the letter from Welfare. All others must get a statement from the probation department.
   f. *Unemployment/Temporary Disability/Family Leave/Workman's Comp* – Provide a copy of your Unemployment/Disability/Family Leave statement; if you have just applied, you must bring in proof of the application.

g. *Own Business* – If you own your own business, you must complete the Own Business Form provided to you by your case worker and submit all supporting documents. YOU MUST provide a Profit and Loss Statement from your accountant, NO EXCEPTIONS. If you are self-employed as a babysitter, you must complete the Own Business Childcare Provider form provided by your case worker.
h. *Scholarship/Parsonage/Stipend* – If any adult household member is receiving scholarship, parsonage, or a stipend, you must provide a letter from the school/organization indicating amount received and frequency.
i. *QTR/Tuition Reimbursement/Childcare Reimbursement* – Letter from any employer/agency who is providing the benefit indicating the amount and frequency.
j. *Adoption/Foster Care Assistance Payments* – Most recent benefit statement.
k. *Other Assistance* –Documentation of any other assistance that you are receiving such as parental/family support, tuition payments for any minors in your household.

******All letters from any individual MUST include their full name, address, and telephone number. ******

4. **FULL TIME STUDENTS -** Anyone over the age of eighteen (18) who is enrolled as a full-time student must bring in a letter from the school, on the school's letterhead, stating full-time status.

5. **VERIFICATION OF CUSTODY OR GUARDIANSHIP** – If not previously provided, if you have legal custody of grandchildren or other family members under the age of eighteen (18), you must submit a court order which states the same. You must also get a notarized letter from the parent(s) of the children stating whether you are receiving any income or support for the care of the children.

6. **VERIFICATION OF ASSETS – FOR ALL FAMILY MEMBERS** – Checking, Savings, Stocks, Bonds, Certificate of Deposit, Real Estate, Money Market, etc. **This includes any online banking accounts. I.e., Chime, Cash App, Direct Express, etc.**

   a. *Checking Accounts* – Last six (6) months of statements. **They must be consecutive and complete.**
   b. *Savings Account* – You must submit the most current bank statement or passbook from the bank. **ATM transaction slips will not be accepted**.
   c. *Savings Bonds* – Copies of the bond must be submitted into the office.
   d. *Money Market/CDs* –Provide the actual bank certificates/statements.
   e. *401k/IRA/Stocks/Mutual Funds/etc.*- Please provide the most recent statement.
   f. *Loans* – If you have given a loan to someone, both you and the recipient must present a letter stating the amount of the loan and whether any part has been repaid. The letter must include the recipient's name, address, and telephone number.

g. *Property* – You must provide the LHA with the following documentation for all properties you own:
   i. Deed
   ii. Current property appraisal (see Realtor)
   iii. Current taxes
   iv. Current insurance policy
   v. Your most recent mortgage statement
   vi. HOA/Condo fees (if applicable)
   vii. Lease (if the property is rented)

h. *Life Insurance Policy* – Whole Life. Complete policy.

7. **VERIFICATION OF CHILDCARE** – This can only be considered for children aged twelve (12) and younger and if the head of household/spouse or both parents are employed or going to school. This does NOT include tuition payments.

   i. *Babysitter* – Child/Dependent Care Verification form must be completed. Contact your case worker to obtain the form.
   j. *Day Care Center* – A letter provided by the Agency on their letterhead indicating the child in their care and amount paid.
   k. *CHS* – A copy of the most recent contract.

8. **SENIOR/DISBALED APPLICANTS ONLY – MEDICAL EXPENSES** – Please bring in any of the following that apply to you:

   l. A letter from any doctor(s) stating the fee(s) for office visits, procedures, tests, or operations anticipated for the coming year.
   m. A letter from any doctor or medical facility for which you have an outstanding balance owed, stating the amount due and any payment arrangements that have been made. We cannot accept bills.
   n. If you carry Blue Cross/Blue Shield, AARP, or Major Medical Insurance, and you pay for this coverage, please provide your most recent statement of payment booklet(s). We cannot accept canceled checks.
   o. Documentation for any out-of-pocket cost for prescriptions, vision care, dental care, or medical mileage.